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ABSTRACT

The relationship of learning style and teaching style to student academic achievement was studied with nontraditional health professional students in credit-seeking educational efforts. Participants were 256 adult students in undergraduate and graduate health professional majors of allied health education, allied health research, and health administration. These students were in evening and weekend classes and at off-campus sites. Learning style was measured by the Canfield Learning Style Inventory, and the teaching style of the 18 instructors was measured by the Principles of Adult Learning Scale. Student achievement was indicated by the students' final course grade. Using analysis of covariance, it was found that in the area of learning style, achievement was greatest among those health professionals who expected to do well in an academic setting and who preferred the conditions of: a well-ordered classroom with a well-informed instructor; the content of working with numbers and logic; and the mode of direct experience. The greatest achievement was among students of teachers who practiced with slight modification the collaborative mode. Implications of the findings are considered. (SW)

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INFLUENCERS OF ACHIEVEMENT AMONG NONTRADITIONAL ADULT HEALTH PROFESSIONAL STUDENTS

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Introduction

Changes in health care delivery practices are creating new needs and determining new directions in the academic preparation of the health care professional. These directions gives focus to the preparation, maintenance, and improvement of the health professional with considerable attention being given to program development and management aspects of educational programs for the health professional. Germane to building a relevant curriculum is delivering the instruction, assessing achievement of the learner, and identifying factors that influence the achievement of the health professional learner.

At the same time that the examination of learning strategies is taking place and at the same time that the health care industry is seeking to attract individuals to the health industry which requires a higher quality of performance and knowledge base, university campuses across the country are experiencing dramatic changes in their student populations. Adults are returning to institutions of higher education and are seeking a different style of program delivery along with different educational strategies.

Colleges and universities have historically focused educational programs on the younger adult students, who are 18 to 25 years of age. Adults in their late twenties, thirties, forties, and older years have enrolled in increasing numbers as the number of traditional age students

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have declined (Wolfgang & Dowling, 1981, p. 640). As they see the older adult continuing to gain greater representation in the educational environment, these institutions are attempting to respond to the redefinition of institutional perspectives and to curricular and teaching strategies (Kasworm, 1980, p.44). The students who are returning to the formal educational environment have had extensive exposure to adult roles and responsibilities. Adults, who are returning from experience with employment or military service, parenthood, or marital status changes, do not need the same kind of educational orientation that the younger adult needs, particularly if the mode of instruction restricts the older student's sense of autonomy (Clarke, 1980, p. 92).

In the older adult student populations are the health professionals who need course offerings at times which accommodate both full-time employment in the health industry and part-time study in an accredited program in higher education. These students are returning to the campuses with an associate or baccalaureate degree in a health-related discipline and are seeking higher educational preparation. The traditional university model for education in which students are prepared to enter into a health profession provides a contrast to the education of professionals, who are active in the delivery of health services and who are returning to the university for a higher degree. Health professional education programs that are associated with institutions of higher education typically are designed in two formats. One format is a traditional educational one which is designed to prepare individuals to enter a health profession at an entry level, e.g. nursing, physical therapy, medical technology, respiratory therapy, or medical record administration. The second format

is a type of educational program which is designed to focus on the functional role of the health professional in the areas of education, administration, and research.

In traditional university education the teachers provide instruction which assists students in transforming basic science concepts to the applied health specialty practice areas. In contrast the educational approach for health professionals who are returning to the university for higher degrees in selected areas is almost exclusively focused on an interdisciplinary approach to health care delivery and practice. This interdisciplinary approach creates a climate for collaboration among health professionals. Therefore, a knowledge of the effects of this cooperation among the health professionals who are functioning in this type of educational preparation could make a major contribution to improving the educational delivery system for health professional students who are returning to the university setting for additional education in a functional area of health care practice. It was this second format of university education in which this study was focused.

Background

The theoretical framework for this study rests in Lewin's Field Psychology (Lewin, 1936) and the Cognitive-Field Theory of Learning (Bigge, 1976). Within these theories, an individual's behavior is seen as a function of the person and the environment of the individual. This can be expanded to include the person's physical environment, classroom climate, teacher attitudes and instructional methods, work conditions, and familiar disposition. All have an impact on the individual learner's perception of appropriate conditions and mode for learning and may, therefore, affect the level of achievement (Schmidt, 1984).

The literature base supports the generalization that individuals do have a learning style which remains relatively constant over time and that it can provide direction for the instructional design. Teaching styles are viewed as influencing the interaction between the learner and the instructor. A variety of teaching styles are known to exist in adult learning situations. Yet, the relationship among learning style, teaching style, and learner achievement remains unclear. Repeatedly the call for additional research has been made to examine this interaction.

The literature base on the health professional students is limited in the areas of teaching styles and in the relationship of learning style, teaching style, and achievement. Therefore, further, systematic investigation is needed in the examination of the relationship of learning style and teaching style to adult learner achievement among allied health professional students.

Findings

This study investigated the relationship of learning style and teaching style to student academic achievement among nontraditional health professional students in credit seeking educational efforts. It involved 256 adult students in undergraduate and graduate health professional majors of allied health education, allied health research, and health administration. These students were in classes offered in the evening, on weekends, and at off-campus sites. The student's learning style was measured by the Canfield Learning Style Inventory (Canfield, 1983). The teaching style of the 18 instructors teaching these courses was measured

by the Principles of Adult Learning Scale (Conti, 1982). Student achievement was indicated by the student's final course grade. Individual differences in student academic ability was adjusted for by using the student's overall grade point average as a covariant.

Analysis of covariance was used to examine the relationship of learning style to student achievement, teaching style to achievement, and the interaction of learning and teaching styles with achievement. In the area of learning style, achievement was greatest among those health professionals who preferred the conditions of a well-ordered classroom with a well-informed instructor, the content of working with numbers and logic, and the mode of direct experience, and who expected to do well in an academic setting. Teaching style produced highly significant differences in the amount of student achievement. While student achievement was above average for all teachers who practiced a highly consistent style, the greatest achievement was among the students of the teachers who practiced with slight modification the collaborative mode that is suggested in the adult literature. The only interaction between learning and teaching styles and achievement was in the area of the student's expectation of academic grade.

Conclusions

This study advances the education knowledge base on learning styles and teaching styles by examining student achievement in a specific adult learning situation. The failure of dominant mode to produce a difference and the nonsignificant findings of many elements of learning style could indicate that more needs to be done than just measure learning styles.

To affect learning, students may need to be informed of their style and information provided to help them capitalize on their learning strengths and develop their weak areas. Further indication is that a knowledge of the student's overall learning style or of the learning preferences in various areas composing learning style may not actually influence student achievement. The learner's final success in the educational setting may be dependent upon the appropriateness of the learning strategy utilized by the teacher.

The teaching style findings are generally congruent with the support of the teacher, as an important variable influencing the learning climate. Specifically the findings of this study suggest that teaching style has a significant influence on student achievement and that a collaborative mode of instruction supports the adult health professional students to achieve at a higher level. The significant teaching style findings decidedly show that treating the health professionals as adults while at the same time respecting the integrity of the curriculum facilitated the greatest amount of student learning. These findings imply that teachers need to take a careful look at themselves and their instructional practices.

Faculty development activities can be conducted to assist teachers to develop teaching styles that are congruent with research findings. As this study identified, teaching style does make a difference with student achievement. Allied health instructors need to be aware of this influence of teaching style. Teaching style assessments could be the first place to initiate these faculty development activities. Such

diagnosis could be followed by learning resource identification and fiscal resource allocation to assist in the transition from any areas of teaching weaknesses to those of strength. Additional studies are needed to investigate the appropriate combination of student readiness for a teaching style that utilizes the student's self-direction. The most efficient student readiness and teaching style combination needs to be empirically determined.

Thus, the influencers of achievement among nontraditional adult health professional students are not seen in identifying the unique characteristics of each student such as learning style, but rather it includes a thorough analysis by teachers of their instructional behaviors and the consequences of their instructional actions. More importantly, this study identifies the importance of teachers providing a consistent style with their teaching.

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